

FINANCIAL APPLICATION

SPONSOR'S AFFIDAVIT OF SUPPORT

A sponsor may be a parent, family member, or another person who will provide financial support. It is not necessary that a financial sponsor reside in the U.S. If there is more than one sponsor, please make a copy of this document for each sponsor to complete. An individual financial sponsor may provide complete or partial support for the student, but the student's total financial support must equal or exceed the total estimated costs (see page 4). If your sponsor is a U.S. citizen or Permanent Resident, he or she may submit an I-134 Affidavit of Support Form instead of the financial statement form. [Affidavit of Support \(I-134\)](#). If you are agreeing to provide support for more than one year, you are only required to show current bank statements *in support of the first year*.

Section 2: TO BE COMPLETED BY STUDENT'S FINANCIAL SPONSOR

I guarantee that I will be responsible for providing financial support to:

 Student's last name Student's first name Student's middle name

First Year Cost: US \$ 23,384.00

I understand that the document I am signing will be used by the student for the purpose of obtaining F-1 status or an F-1 visa from the U.S. government or for the purpose of updating the student's SEVIS record. If I am unable to provide the financial support I have promised, I understand that GCC is not obligated to support the above named student. I understand that without my financial support, it is likely that the student will be unable to continue his/her education in the United States.

I understand that F-1 students are not permitted to work, and I will not suggest or require this student to provide any services while in the United States.

Sponsor's Name (please print) _____

Street Address _____

City/Town/Province _____

State/Postal Code/Country _____

Telephone (with country/area code) _____

Relationship to the student _____

Sponsor's signature _____ **Date** _____

FINANCIAL APPLICATION

BANK VERIFICATION OF DEPOSIT

Bank certification of sponsor's accounts must be current and cannot exceed six (6) months from the date of the bank officer's signature and stamp.

This is to certify that the Account Holder (**print name**) _____

is a customer of (**name of bank**) _____.

His/hers account(s) were opened on (**date**) _____ and for the past year has shown an average balance equal to U.S. \$ _____.

Current funds available in U.S. Dollars as of today's date are:

Checking Account No. _____ Amount _____ and/or

Saving Account No. _____ Amount _____.

The accounts are open and viable as of today's date. This certification is offered with no responsibility on the part of the financial institution.

Printed Name of Bank Official _____

Title _____

Bank Address _____

BANK SEAL OR STAMP



Print Name of Bank Official _____

Signature of Bank Official _____